

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	N/A
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	GUIDE FOR SPINAL TOOLS, IMPLANTS, AND DEVICES
Attorney Docket Number::	101896-0239
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	11
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Jonathan
Family Name::	Fanger
City of Residence::	Fall River
State or Province of Residence::	MA
Country of Residence::	US
Street of mailing address::	3 Rolling Green Drive, Apt. H
City of mailing address::	Fall River
State or Province of mailing address::	MA
Postal or Zip Code of mailing address::	02720

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Eric
 Middle Name:: D.
 Family Name:: Kolb
 City of Residence:: Quincy
 State or Province of Residence:: MA
 Country of Residence:: US
 Street of mailing address:: 308 Quarry Street
 City of mailing address:: Quincy
 State or Province of mailing address:: MA
 Postal or Zip Code of mailing address:: 02169

Correspondence Information

Correspondence Customer Number:: 021125

Representative Information

Representative Customer Number:: 021125

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/664,575	09/17/03
10/664,575	Continuation-in-part of	10/409,958	04/09/03
10/664,575	Continuation-in-part of	10/609,123	06/27/03